SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISIONLOS COCCODADATIONS

1006

1990	60 at 1	VISION OF CONFORMING
DOCUMENT # 1. Corporation Name	P9500005986	7 (8)
PANHANDLE REALT	y of northwest florid	A, INC.
Principal Place of Business	Mailing Addr	ess
P.O. BOX 2693 FORT WALTON BEACH FL 3254	P.O. BOX 26 9 FORT WALTO	93 ON BEACH FL 32549



Principal Pla	ace of Business	Mailing Addres	ss				III BOILL DOLLI BELL		IRIOI IDLEO DEL	
P.O. BOX 2693 FORT WALTON BEACH FL 32549			P.O. BOX 2693 FORT WALTON BEACH FL 32549							
L				•		3. Date Incorporated 08/02/1995	or Qualified	3a. Dat	e of Last R	eport
	Place of Business	2a. Mailing Add	dress			4. FEI Number			AF	plied For
21	***************************************	26				59- 3 3281	49			t Applicable
Suite, Ap		Suite, Apt				5. Certificate of Status	: Desired		\$8.75 / Fee Re	
City & Sta		City & State	e 			6. Election Campaign Trust Fund Contribu			\$5.00 Added	
Zip	Country	Zip	<u> </u>	Country		8. This corporation ha	s hability for in			199 032,
24	25	29	30)		Florida Statutes	<u></u>	Yes 📗		
	9. Name and Address of Curr		[81	Name	10. Name and Addres	s of New Reg	istered A	gent	
	ORPORATION SERVICE COMPA	VNY		"	Name					
	201 HAYS STREET			82	Street Add	ress (P.O. Box Number is N	ot Acceptable	o)		
T/	ALLAHASSEE FL 32301-2525			90						
				83						
				84	City				85 Zip (Code
	nt to the provisions of Sections 607.0							<u>FL</u>		
Affica a	rregistered agent, or both so the Sta	te of Florida. Such cha-	طنيم عمينا ممم	orized by t	the econorali	ion's board of directors. The	meny accent t	the appoin	tment as re	gistered
agent I	am tamiliar with, and accept the obli	gations of, Section 607	7.0505, Florida	a Statutes.	uie corporati		or my mooph			
office of agent 1 SIGNATURE	am tamiliar with, and accept the obli	gations of, Section 607	7.0505, Florida	a Statutes.		red when reinstating)		DA'F		
agent I	am familiar with, and accept the oblining Signature typed or printed name of registered.	gations of, Section 607	7.0505, Florida	a Statutes.				DATE.	DIRECTOR	S IN 12
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further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 13 or Block 13 or on an attachment with an address.

GNATURE:

SIGNATURE:

PHILLIP V ROY president

2550 96 904 93969